

## COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 4/25/2013 8:20 AM Fee Receipt: \$40.00

Division of Business Filings Business Filings PO Box 718 Articles of Organization Limited Liability Company

KLC

| O Box 718 rankfort, KY 40602 502) 564-3490 rww.sos.ky.gov   |  |                                     |                                      |
|---|--|-------------------------------------|--------------------------------------|
| Pursuant to KRS 14A and KRS 275, the undersign  | ned applies to qualify and for that purp   | ose submits the f                   | ollowing statements:                 |
| Article I: The name of the limited liability company Addie Foster, LLC  | ris  |                                     |                                      |
| Article II: The street address of the limited liability   | company's initial registered office in     | Kentucky is                         |                                      |
|   | Lexington                                  | KY                                  | 40503                                |
| 158 Burt Road Street Address Only (No Post Office Box Numbers)  | City                                       | State                               | Zip Code                             |
| Street Address Only (No Post Office Box 1988)   | V. Todd Yates                              |                                     |                                      |
| and the name of the initial registered agent at that  | Collice is                                 |                                     |                                      |
| Article III: The mailing address of the limited liabil  | lity company's initial principal office is | 101                                 | 40500                                |
| 158 Burt Road   | Lexington                                  |                                     | 40503                                |
| Street Address or Post Office Box Number  | City                                       | State                               | Zip Code                             |
| B. its member(s).  Article V: This application will be effective upon date or the delayed effective date cannot be prior  I/We declare under penalty of perjury under the | r to the date the application is filed.    | The date and/or e foregoing is true | (Delayed effective date and/or time) |
| 11 may mark   | Printed Name & Title                       | nanagei                             | Date                                 |
| Signature of Organizer  | James I. Magee, N                          | /lember                             | 4/24/13                              |
| Signature of Organizer  | Printed Name & Title                       | Member                              | Date                                 |
| V. Todd Yates  Print Name of Registered Agent   | , consent to serve as the registered       |                                     | the limited liability company        |
| Signature of Registered Agent   | Printed Name                               |                                     | ate                                  |
| (01/12)   |  |                                     |                                      |